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AP Language and Composition

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Global Health Care

**Section I**

Providing primary healthcare to the most impoverished people of the world is an ongoing debate in today’s society. However, this debate comes down to what is morally right and wrong–provide healthcare and basic necessities to those without access to them or ignore those whose deaths are easily preventable. The book *Mountains Beyond Mountains* by Tracy Kidder provides readers with an inspiring story about Dr. Paul Farmer, a man who knows what is right and devotes himself to providing basic health care to the world’s neediest peoples.

**Section II**

Tracy Kidder, the author of *Mountains Beyond Mountains*, demonstrates first-hand knowledge of Paul Farmer’s work. Through his travels with Farmer over a span of several years, Kidder experienced Farmer’s unique ability to improve the lives of citizens of Haiti and many other third-world areas. Tracy Kidder attended Harvard where he earned his Bachelor of the Arts before joining the army and becoming a first lieutenant in the Vietnam War (Lettre Ulysses Award | Tracy Kidder, USA). Before meeting Farmer, Kidder wrote several other non-fiction works, some of which won him elite awards and prizes. He won a Pulitzer Prize and National Book Awardfor *The Soul of a New Machine*. Another of his books, *Among Schoolchildren,* is about social justice for the poor. This book along with previous works about social injustice gave Tracy Kidder a basis of knowledge before beginning to write *Mountains Beyond Mountains*.

**Section III**

*Mountains Beyond Mountains* presents readers with a vivid, persuasive narrative about Dr. Paul Farmer. Through describing Farmer’s life, the novel attempts to persuade readers that it is a moral responsibility to maintain the health of every person in the world. *Mountains Beyond Mountains* is divided into five parts. Beginning with the first part titled “Doktè Paul,” Tracy Kidder provides an introduction on how the rest of the novel will be by narrating on his observations and telling stories about Dr. Paul Farmer.. Immediately, Kidder forces his own awestruck opinion of Farmer onto his readers in his brief story of thirty-five year old, HIV positive, chain smoking, alcoholic, homeless Joe. Joe is just one of the many patients whom Farmer treats that the rest of the world has cast aside. Upon his examination, Joe and Dr. Farmer “talked on and on” as would old friends (Kidder 11). With this method, Farmer was able to get much better answers out of Joe to the same questions previously asked by normal nurses at the Brigham Hospital in Boston, Massachusetts. Joe’s case is just one example of how Paul Farmer learns about and becomes close with his patients in order to treat them to the absolute best of his ability. By informing readers of Doctor Farmer’s friendly methods, Tracy Kidder appeals to logos and pathos by infusing a sense of amazement at the doctor’s kindness and talents. Kidder is successful in describing Farmer as the ultimate benefactor of the socially forgotten.

The second part of the novel, “The Tin Roofs of Cange,” Kidder describes Farmer’s unconventional upbringing. This proves one of Kidder’s underlying theses of *Mountains Beyond Mountains* – that any one person, despite his or her background, can make a huge difference in the world. In addition, Farmer’s organization, Partners in Health (PIH), mentioned for the first time. Toward the end of the chapter, Kidder uses direct language in quotes and sentence structure. This style imposes a sense of urgency and suspense to find out how Farmer will continue his good work in Haita while he is opposed by strong forces. Farmer has been banned from the antagonistic Haitian government due to his good deeds in Cange at PIH’s hospital, Zanmi Lasante. When the organization seems to have hit rock bottom in funding and hope, Kidder describes the situation with intense language and short sentence structure. This method of writing conveys the apparent hopelessness of the situation.

The third chapter of *Mountains Beyond Mountains*, “Médicos Aventureros,” begins with Kidder straying away from dialogue usage and instead using description in paragraph form of Partners in Health’s deeds in various forgotten corners of the world. Throughout this chapter, Dr. Farmer’s work is expressed in simple language describing how Farmer overcame the obstacles of his work. In Carabayllo, Peru “they started treating patients…transporting Zanmi Lasante’s TB program to Carabayllo” (Kidder 143). Although Kidder has pegged Farmer for already being far too busy with his work in Haiti, he cannot hide his disbelief at the doctor’s ability to take on another huge project while continuing progress in both Haiti and in Boston. One example of Kidder’s multiple uses of pathos can be found when Farmer is asked to examine a young girl with pulmonary TB who is taking all five MDR medications, all of which she is resistant to. Later, the language changes to one of calm suspense as Farmer becomes sick and learns that he has acquired Hepatitis A in Peru. As he’s dealing with recovering from Hepatitis, Dr. Farmer works to develop a method to treat the multi-drug resistant tuberculosis he found in Peru. The admiration of the author, along with his full-hearted belief in Paul Farmer, vividly jumps off the pages.

In the following chapter, “A Light Month for Travel,” Tracy Kidder continues to describe Paul Farmer and PIH conquer the world’s MDR– TB crisis. Kidder uses short sentences to list all of Farmer’s tasks. Toward the middle of the chapter, Kidder states, “I imagine that many people would like to construct a life like Farmer’s, to wake up knowing what they ought to do and feeling that they were doing it” (Kidder 213). However, upon discussion with Farmer, the author learns that Farmer is yet unsatisfied no matter how much he accomplishes – he always feels as if he could be orshould be doing more. In addition, Kidder appeals to logos when describing one specific event at which Farmer explained how women in Haiti who are affected by HIV are most often employed as servants in the city of Port-au-Prince. However, these women, lacking any education and knowledge of HIV, cannot be blamed for their unfortunate conditions, which were the source of their infection. Farmer illustrates how blaming these women for their diseases and conditions is unethical and completely illogical.

In the final chapter of *Mountains Beyond Mountains*, Kidder recounts many aspects from the rest of the novel along with describing in brief, narrative form how Partners in Health’s various projects throughout the world have progressed. The author begins concluding the book by talking with co-workers of Farmer. One in particular, Jim Yong Kim, discusses his opinions of Paul Farmer.

“Paul is a model *of* what should be done. He’s not a model *for* how it has to be done. Let’s celebrate him. Let’s make sure people are inspired by him. But we can’t say anybody should or could be just like him.” He added, “Because if the poor have to wait for a lot of people like Paul to come along before they get good health care, they are totally fucked.” (Kidder 244) Tracy Kidder takes the rest of the chapter to describe Dr. Farmer’s ongoing progress and success in world health. Kidder makes no attempt to hide his amazement and admiration of Dr. Paul Farmer and how he leads his life bringing quality healthcare to those who need it the most.

Despite the noble message of *Mountains Beyond Mountains*, some could say that Tracy Kidder’s account is biased. By traveling with Dr. Farmer for such a long time, he has established a friendship and an extreme admiration of the doctor. This opinion of Farmer could be the reason for neglect of any negative aspect of Farmer and his work. Although some critics could argue that Kidder’s account is heavily influenced by his friendship with Farmer, it would be extremely difficult to discount all of Farmer’s good deeds; therefore, Kidder’s friendship and bias is easily negligible. In addition, the text jumps from country to country, month to month, and among several years. Readers can easily become confused with where events are taking place and who is involved where.

**Section IV**

Although Tracy Kidder provides a very good argument for the provision of global health care, there are those who will argue that Farmer’s work is a waste of time. A particular source claims that although global health is important in today’s society, the donors and those who see to global health are corrupt in going after profits instead of assisting those who truly need the help(Ollila). Although funding is still provided, the private sector that is doing so has the wrong intentions (Ollila). In addition, with the shift to funds coming from the private sector, priorities have changed. Only three of eight stated goals by the UN have been related to health (Ollila). Many people would argue that the time and effort spent in providing health care to the world is not worth it and not our responsibility. The same people would claim that the fault of poor health care lies with the people who lack substantial knowledge of how to take care of themselves and that the lack of knowledge is also their fault.

Another downside to globalizing health care is the fact that multiple organizations are trying to help and are therefore getting in each others’ ways. Funding for each individual organization is spreading money apart so that it is of little aid. In addition, a single method published by the World Health Organization (WHO) doesn’t account for all people in all situations. One such program called DOTS is WHO’s method for treating Tuberculosis. While in Peru upon examination of severe TB patients, Paul Farmer discovered that the DOTS program that was designed to cure the entire world of TB was actually what was causing MDR. The discovery was that “repeated improper therapy can select for increasingly resistant mutants and create strains resistant to any number of drugs” (Kidder 139). The doctors’ cannot be blamed for administering the TB drugs because doing so was official policy created by WHO. Unless treatment can be personalized to each country, town, and patient, globalized health programs will only cause further damage such as the DOTS programs did in Peru.

**Section V**

In conclusion, I agree full-heartedly with Tracy Kidder and Paul Farmer that it is our duty to provide healthcare to those in greatest need. I’d never thought much on the subject before, but I now agree that the health of the entire world’s population affects us all. Despite the efforts of donors such as the Bill & Melinda Gates Foundation, “only half the money donated for health projects…makes it to hospitals and clinics, let alone patients” (Bazell). This fact admits that there are those trying to do their part in global health, but circumstances and current systems are falling short and failing to make the most out of donations and aid. Many influential people support globalizing health care and bringing primary care to those in the most need. These people include Bill Gates and Senator Edward M. Kennedy. The belief among many is that, as stated by Senator Kennedy in his speech at the 25th anniversary of the Alma-Ata Declaration, “quality, affordable health care for all people is a matter of basic fairness. Health care should be a fundamental right of every man, woman, and child” (Kennedy). Just because a person or family lives in a country that can not afford to provide its people with proper health care does not mean that those people don’t have the right as any of us in the United States to receiving proper, quality care. In the Declaration of Human Rights adopted by the United Nations in 1948, Article 25 states that all people have the right to adequate living conditions for him/herself and family. This includes “food, clothing, housing and medical care” (The Universal Declaration of Human Rights). Partners in Health, also describes the importance of proper living condition and nutrition to global health. They make the point that those who are in greatest need of nourishment are most likely the ones who have the least. Facts, such as unsafe water causes three billion deaths a year, inform us that by providing one simple necessity of safe, sanitary water, billions of lives can be changed. Partners in Health also describes the importance of proper, clean housing to patients in Haiti because “home is not a place of comfort but an incubator for disease and despair,” (Food, Water, and Housing). Many people will claim that providing sufficient basic health care along with sanitary necessities to all of the world’s inhabitants is impossible, but if everyone does their part in an uncorrupt manner, we can save billions of lives that would have been taken by curable diseases.

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